# Case 17-02733 Doc 1 Filed 01/31/17 Entered 01/31/17 13:31:19 Desc Main Document Page 1 of 61

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

### Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
y p e	your pictu exar	e the name that is on government-issued ire identification (for nple, your driver's	Zay First name  M.	First name
	license or passport).	Middle name	Middle name	
	iden	g your picture tification to your ting with the trustee.	Carrasquillo Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ide your married or den names.		
3.	you num Indi	the last 4 digits of Social Security Seer or federal Vidual Taxpayer tification number	xxx-xx-3485	

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Debtor 1 Zay M. Carrasquillo

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and	■ I have not used any business name or EINs.  Business name(s)	☐ I have not used any business name or EINs.  Business name(s)			
	doing business as names					
		EINs	EINs			
5.	Where you live	ASS Welmed De And 200D	If Debtor 2 lives at a different address:			
		155 Walnut Dr. Apt. 209B Saint Charles, IL 60174 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Kane	Number, Street, City, State & ZIF Code			
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6. Why you are choosing		Check one:	Check one:			
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	<ul> <li>Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.</li> </ul>			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Debtor 1 Zay M. Carrasquillo

Case number (if known)

Par	Tell the Court About	Your E	Bankruptcy Ca	se			
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	■ Chapter 7					
			Chapter 11				
			Chapter 12				
			Chapter 13				
3.	How you will pay the fee	pay the fee  I will pay the entire fee when I file my petition. Please check with the clerk's office in your lo about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, corder. If your attorney is submitting your payment on your behalf, your attorney may pay with a a pre-printed address.					neck, or money
					tallments. If you choose this options (Official Form 103A).	on, sign and attach the Application for Indiv	iduals to Pay
			I request tha	t my fee be wa	aived (You may request this option	n only if you are filing for Chapter 7. By law ur income is less than 150% of the official	
			applies to you	ır family size ar	nd you are unable to pay the fee ir	n installments). If you choose this option, your line is a firm 103B) and file it with your petition	ou must fill out
).	Have you filed for bankruptcy within the	■ N					
	last 8 years?	☐ Ye	es.				
			District		When		
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy	■ N	0				
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Y	es.				
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	□ N	o. Go to I	ne 12.			
	residence:	■ Ye	es. Has yo	ur landlord obta	ained an eviction judgment agains	t you and do you want to stay in your resid	ence?
				No. Go to line	12.		
				Yes. Fill out In		Judgment Against You (Form 101A) and file	e it with this

		Document	Page 4 01 61	
Debtor 1	Zay M. Carrasquillo		Case number (if known)	

Part	Report About Any Bu	sinesses	You Owr	as a Sole Proprieto	or	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Go to Part 4.		
		☐ Yes.	Name	and location of busir	ness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	Name of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, State & ZIP Code			
	it to this petition.		Chec	to describe your business:		
				Health Care Busine	ess (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real E	Estate (as defined in 11 U.S.C. § 101(51B))	
				☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))		
				☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))		
				None of the above		
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?  If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance she operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, following in 11 U.S.C. 1116(1)(B).		small business debtor, you must attach your most recent balance sheet, statement of deral income tax return or if any of these documents do not exist, follow the procedure				
	For a definition of small	No.	I am r	not filing under Chapte	er 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.		
		☐ Yes.	I am f	iling under Chapter 1	1 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Part	4: Report if You Own or	Have Any	, Hazardo	ous Property or Any	Property That Needs Immediate Attention	
	Do you own or have any	■ No.	- razara	rue i reporty or runy	Troporty That Hoode Illinounder Allerine.	
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	■ No.	What is	the hazard?		
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	Number Chart City Chate 9 7 or de	
					Number, Street, City, State & Zip Code	

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Zay M. Carrasquillo Debtor 1

Case number (if known)

15. Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. 

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. 

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. 

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. 

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Zay M. Carrasquil	lo	Document	i age o oi oi	Case number (if k	nown)		
Part	6: Answer These Quest	ions for Rep	orting Purposes					
16.	What kind of debts do you have?		re your debts primarily consundividual primarily for a personal,			in 11 U.S.C. § 101(8) as "incurred by an		
			No. Go to line 16b.					
			Yes. Go to line 17.					
			Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			No. Go to line 16c.					
			Yes. Go to line 17.					
		16c. S	tate the type of debts you owe the	at are not consumer de	bts or business de	bts		
17.	Are you filing under Chapter 7?	□ No. I	am not filing under Chapter 7. Go	o to line 18.				
af pr ad ar be di	Do you estimate that after any exempt property is excluded and administrative expenses	<b>—</b> 163.	re paid that funds will be available			is excluded and administrative expenses		
	are paid that funds will be available for distribution to unsecured creditors?		No Yes					
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-199 □ 200-999		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000		☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000		
19.	How much do you estimate your assets to be worth?	■ \$0 - \$50,000 □ \$50,001 - \$100,000 □ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$1,000,001 - \$10 n □ \$10,000,001 - \$50 □ \$50,000,001 - \$100 □ \$100,000,001 - \$50	million O million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
20.	How much do you estimate your liabilities to be?	□ \$0 - \$50,000 ■ \$50,001 - \$100,000 □ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$1,000,001 - \$10 n □ \$10,000,001 - \$50 □ \$50,000,001 - \$100 □ \$100,000,001 - \$50	million O million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
Part	7: Sign Below							
For	you	I have exam	nined this petition, and I declare u	under penalty of perjury	that the informatio	n provided is true and correct.		
			osen to file under Chapter 7, I am es Code. I understand the relief a			er Chapter 7, 11,12, or 13 of title 11, e to proceed under Chapter 7.		
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out th document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				attorney to help me fill out this				
		I request rel	lief in accordance with the chapte	er of title 11, United Stat	es Code, specified	d in this petition.		
		bankruptcy and 3571.				operty by fraud in connection with a s, or both. 18 U.S.C. §§ 152, 1341, 1519		
			rrasquillo	Signa	ature of Debtor 2			
		Executed or	January 31, 2017 MM / DD / YYYY	Exec	uted onMM / DE	D/YYYY		

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Debtor 1 Zay M. Carrasquillo Document Page 7 of 61 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Bradley S. Covey	Date	January 31, 2017					
Signature of Attorney for Debtor		MM / DD / YYYY					
Bradley S. Covey Printed name							
Law Offices of Bradley S. Covey, P.C.							
428 S. Batavia Ave.							
Batavia, IL 60510							
Number, Street, City, State & ZIP Code							
Contact phone <b>630-879-9559</b>	Email address	bradley.covey@gmail.com					
6208786							
Bar number & State							

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Deb	tor 1 Zay M. Carrasquill	o			Case number (if know	vn)	
Par	6: Answer These Questi	ons for R	eporting Purposes				
16.	What kind of debts do you have?	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. individual primarily for a personal, family, or household purpose."				. § 101(8) as "incurred by an	
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.	Are your debts primarily be money for a business or inv				
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you	owe that are not consume	er debts or business debt	S	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and administrative expenses	■ Yes.	I am filing under Chapter 7. are paid that funds will be a			excluded	and administrative expenses
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes				
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-1 □ 200-9	99	□ 1,000-5,000 □ 5001-10,000 □ 10,001-25,000	Į.		1-50,000 1-100,000 han100,000
19.	How much do you estimate your assets to be worth?	■ \$0 - \$50,000 □ \$50,001 - \$100,000 □ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$1,000,001 - \$ □ \$10,000,001 - □ \$50,000,001 - □ \$100,000,001	\$50 million [	□ \$1,000 □ \$10,00	000,001 - \$1 billion 0,000,001 - \$10 billion 00,000,001 - \$50 billion than \$50 billion
20.	How much do you estimate your liabilities to be?	□ \$100	550,000 001 - \$100,000 ,001 - \$500,000 ,001 - \$1 million	□ \$1,000,001 - \$ □ \$10,000,001 - □ \$50,000,001 - □ \$100,000,001	\$50 million [ \$100 million	□ \$1,00 □ \$10,0	000,001 - \$1 billion 0,000,001 - \$10 billion 00,000,001 - \$50 billion than \$50 billion
Par	7: Sign Below						
For	you	I have ex	xamined this petition, and I de	eclare under penalty of pe	rjury that the information	provided	is true and correct.
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					help me fill out this	
	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1 and 3571.					aud in connection with a	
	1	Zay M. Signatur	Carrasquillo e of Debtor 1		Signature of Debtor 2		
		Execute	d on 01 09 20 MM/DD/YYYY	17	Executed on MM / DD /	YYYY	

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Fill in this infor	mation to identify your	case:	<b>非正规则是</b> 有关。		
Debtor 1	Zay M. Carrasqui	llo	N/N/L-L-L-MANAGE AND		
	First Name	Middle Name	Last Name		
Debtor 2					
Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
if known)				по	heck if this is an
					mended filing
	<u>n 106Dec</u> tion About a	ın Individual	Debtor's So	chedules	12/15
	8 U.S.C. §§ 152, 1341, 1				
MATCHING!		one who is NOT an atto	rney to help you fill out b	pankruptcy forms?	
■ No					
☐ Yes. I	Name of person			Attach Bankruptcy Petitio	
	50 N			Declaration, and Signatu	re (Official Form 119
~ /					
Under pena	ilty of perjury, I declare	that I have read the sum	nmary and schedules file	ed with this declaration and	
that they ar	e true and correct.	N 1			
x S	(MXX)		X		
Zay M.	. Carrasquillo	9	Signature of	Debtor 2	
Signatu	re of Debtor 1	1			
Date	V 01104	12017	Date		

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Debtor 1 Zay M. Carrasquillo	Case number (if known)
Description of leased Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:  Lessor's name:	☐ Yes
Description of leased Property:	☐ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention a property that is subject to an unexpired lease.  X  Zay M. Carrasquillo  Signature of Debtor 1	X Signature of Debtor 2
Date 01/04/197	Date

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### United States Bankruptcy Court Northern District of Illinois

		Trotting District of Illinois		
In re	Zay M. Carrasquillo		Case No.	
		Debtor(s)	Chapter 7	
	VER	FICATION OF CREDITOR M	IATRIX	
		Number of	Creditors:	26
	The above-named Debtor(s) he (our) knowledge.	ereby verifies that the list of credi	tors is true and correct to t	he best of my
Date:	bi/09/2012	Zay M. Carrasquillo Signature of Debtor		

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Fill in this inform	nation to identify your	case:					
Debtor 1	Zay M. Carrasqui	lo					
Debtor 2	First Name	Middle Name		Last Name		_	
(Spouse if, filing)	First Name	Middle Name		Last Name		-	
United States Ban	kruptcy Court for the:	NORTHERN DIS	STRICT OF	ILLINOIS		_	
Case number						1	Check if this is an amended filing
Official For	m 107 of Financial A	ffairs for l	ndividı	uals Filing	ı for Bankrıı	ntcv	4/1
Part 12: Sign B I have read the an are true and corre with a bankruptcy	elow  swers on this Statemers. I understand that recase can result in fin	ent of Financial A	tement, co	oncealing prope	rty, or obtaining mo	oney or property b	
Zay M. Carraso	Millo		Signature	e of Debtor 2			
Signature of Deb	01/09/10	17	Date _				
Did you attach ad ■ No □ Yes	ditional pages to You	Statement of Fin	ancial Affa	airs for Individu	als Filing for Bankr	uptcy (Official For	m 107)?
■ No	Person Attach th					e (Official Form 11	9).

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Fill in this information to identify your case.	Check one box only as directed in this form and in Form
Debtor 1 Zay M. Carrasguillo	122A-1Supp
Deblor 2 (Spouse, Fling)	_
United States Bankruptcy Court for the: Northern District of Illinois  Case number	■ 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2).
(#Anown)	3. The Means Test does not apply now because of qualified military service but it could apply later.
Official Form 122A - 1	☐ Check if this is an amended filing
hapter 7 Statement of Your Current Month	nly Income 12/18

Part 3: Sign Below

By signing here, I declare under perialty of perjury that the information on this statement and in any attachments is true and correct.

X

Zay M./Cafrasquilio
Signature of Debtor 1,

Date

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2,

If you checked line 14b, fill out Form 122A-2 and file it with this form.

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Fill in this information to identify you	r case:
Debtor 1 Zay M. Carrasquillo	
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the:	Northern District of Illinois
Case number	

Gheck the appropriate box as directed in

According to the calculations required by this Statement:

1. There is no presumption of abuse.

2. There is a presumption of abuse.

☐ Check if this is an amended filing

Official Form 122A - 2 Chapter 7 Means Test Calculation

04/16

Sign Below Part 5:

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

Zay M. Carrasquillo Signature of Debtor 1

		Docume	nt Page 15 of 61	
Fill in this infor	mation to identify your	case:		
Debtor 1	Zay M. Carrasqui	llo		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				Check if this is an amended filing

#### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	11: Summarize Your Assets		
		Your as	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	15,885.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	15,885.00
Par	t 2: Summarize Your Liabilities		
			<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	19,900.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	78,411.00
	Your total liabilities	\$	98,311.00
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,273.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,249.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	a personal,	family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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Page 16 of 61
Case number (if known) Debtor 1 Zay M. Carrasquillo

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

4,837.84 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

			Document	Page 17 of 61		
Fill in	n this inf	ormation to identify y	our case and this filing:			
Debto	or 1	Zay M. Carras	quillo			
		First Name	Middle Name	Last Name		
Debto (Spous	or 2 se, if filing)	First Name	Middle Name	Last Name		
Unite	d States	Bankruptcy Court for th	e: NORTHERN DISTRICT OF ILL	INOIS		
Case	number					☐ Check if this is an
		-				amended filing
Offi	cial F	Form 106A/B				
Sc	hedı	ıle A/B: Pro	perty			12/15
think in	t fits best	. Be as complete and ac nore space is needed, att	cribe items. List an asset only once. If curate as possible. If two married peop ach a separate sheet to this form. On t	le are filing together, both a	are equally responsible for s	supplying correct
Part 1	Descri	be Each Residence, Buil	ding, Land, or Other Real Estate You O	wn or Have an Interest In		
1. <b>Do</b>	you own	or have any legal or equi	table interest in any residence, building	g, land, or similar property?	,	
<b>=</b> 1	No. Go to	Part 2.				
	Yes. Whe	re is the property?				
Part 2	2 Descri	ibe Your Vehicles				
		, trucks, tractors, spoi	t utility vehicles, motorcycles			
3.1	Make:	Chevrolet	Who has an interest in t	he property? Check one		claims or exemptions. Put
	Model:	Malibu LT	Debtor 1 only			red claims on Schedule D: aims Secured by Property.
	Year:	2015	Debtor 2 only		Current value of the	Current value of the
		mate mileage: formation:	Debtor 1 and Debtor 2	•	entire property?	portion you own?
	Otherin	ioimation.	At least one of the deb	itors and another		
			Check if this is commoder (see instructions)	nunity property	\$12,400.00	\$12,400.00
Exa	No Yes  dd the dages you	Boats, trailers, motors, pollar value of the portion have attached for Palibe Your Personal and H	on you own for all of your entries to 2. Write that number here	nowmobiles, motorcycle a	accessories ny entries for	\$12,400.00  Current value of the
						portion you own?  Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

Case 17-02733 Doc 1 Filed 01/31/17 Entered 01/31/17 13:31:19 Desc Main Document Page 18 of 61 Debtor 1 Case number (if known) Zay M. Carrasquillo Yes. Describe..... \$370.00 Misc. household goods and furnishings 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... \$200.00 Misc. household electronics 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... Misc. wearing apparel \$200.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$200.00 Misc. jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$970.00 for Part 3. Write that number here .....

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?

Do not deduct secured

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Case number (if known) Debtor 1 Zay M. Carrasquillo claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... \$100.00 checking Chase 17.1. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual: ■ Yes. ..... rent Fox Run Apartments \$915.00 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No

Official Form 106A/B Schedule A/B: Property page 3

☐ Yes. Give specific information about them...

		Case 17-027	33 Do	oc 1	Filed 01/31/17 Document	Entered 01/31 Page 20 of 61	/17 13:31:19	Desc Main
D	ebtor 1	Zay M. Carrasqu	illo				ase number (if known)	
26	Examp  ■ No		names, web	sites, pr	s, and other intellectu oceeds from royalties a		s	
27	Examp ■ No	es, franchises, and coles: Building permits, Give specific informa	exclusive li	censes,	gibles cooperative association	n holdings, liquor license	es, professional licens	es
M		property owed to you						Current value of the portion you own? Do not deduct secured claims or exemptions.
28	□ No	unds owed to you	ion obout th	an in a		ody filed the returns one	I the toy years	
	■ Yes.	Give specific informat	ion about tr	nem, inci	luding whether you alrea	ady filed the returns and	the tax years	
				estim	nated tax refund for	2016	federal and stat	e \$1,500.00
	Other a Examp  ■ No □ Yes. Interes	benefits; unpaid life Give specific informates in insurance policity.	wes you isability insuloans you notion	nade to s				
	■ No	, ,		•	ealth savings account (F	HSA); credit, homeowne	er's, or renter's insurar	nce
	⊔ Yes.	Name the insurance o	company of Company i		licy and list its value.	Beneficiary	r.	Surrender or refund value:
32	If you a someo		a living trus		someone who has die t proceeds from a life ins		urrently entitled to rece	eive property because
33	Examp  ■ No		yment disp		rou have filed a lawsui surance claims, or rights		or payment	
34	■ No	contingent and unlique Describe each claim.		aims of (	every nature, including	g counterclaims of the	debtor and rights to	set off claims
35	. Any fin ■ No	ancial assets you di	d not alrea	dy list				
		Give specific informa	tion					

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Deb	otor 1	Zay M. Carrasquillo		Case number (if known)	
36.		he dollar value of all of your entries from Part 4, includin		-	\$2,515.00
Part	5: Des	scribe Any Business-Related Property You Own or Have an Inter	est In. List any real esta	ite in Part 1.	
37. <b>C</b>	Oo you c	own or have any legal or equitable interest in any business-relate	ed property?		
	No. Go	to Part 6.			
	Yes. G	so to line 38.			
Part		scribe Any Farm- and Commercial Fishing-Related Property You ou own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	et In.	
16. I	Do you	own or have any legal or equitable interest in any farm-	or commercial fishin	g-related property?	
	No.	Go to Part 7.			
	☐ Yes.	Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That You	ı Did Not List Above		
	Examp	have other property of any kind you did not already list bles: Season tickets, country club membership	?		
_	No No				
_	⊒ Yes.	Give specific information			
54.	Add t	he dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$0.00
56.	Part 2	2: Total vehicles, line 5	\$12,400.00		
57.	Part 3	3: Total personal and household items, line 15	\$970.00		
58.	Part 4	: Total financial assets, line 36	\$2,515.00		
59.	Part 5	: Total business-related property, line 45	\$0.00		
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$15,885.00	Copy personal property total	\$15,885.00

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$15,885.00

		I A A A HILLS	111111111111111111111111111111111111111	
Fill in this infor	mation to identify your	case:		
Debtor 1	Zay M. Carrasqui	llo		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				
(if known)				Check if this is
				amended filing

#### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
\$370.00		\$370.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$200.00		\$200.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$200.00		\$200.00	735 ILCS 5/12-1001(a)
		100% of fair market value, up to any applicable statutory limit	
\$200.00		\$200.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$100.00		\$100.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
	\$200.00 \$200.00	\$200.00 \$200.00 \$100.00 \$100.00	\$370.00  \$370.00  \$370.00  \$370.00  \$370.00  \$370.00  \$370.00  \$200.00  \$200.00  \$200.00  \$200.00  \$200.00  \$200.00  \$200.00  \$200.00  \$200.00  \$200.00  \$200.00  \$200.00  \$200.00  \$200.00  \$200.00  \$200.00  \$300.00

Case 17-02733 Filed 01/31/17 Entered 01/31/17 13:31:19 Page 23 of 61 Document Debtor 1 Zay M. Carrasquillo Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B rent: Fox Run Apartments 735 ILCS 5/12-1001(b) \$915.00 \$915.00 Line from Schedule A/B: 22.1 100% of fair market value, up to any applicable statutory limit federal and state: estimated tax 735 ILCS 5/12-1001(b) \$1,500.00 \$1,500.00 refund for 2016 Line from Schedule A/B: 28.1 100% of fair market value, up to any applicable statutory limit (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

3.	Are you claiming a	homestead	exemption of	of more	than	\$160,	3757
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Doc 1

- Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
  - No
  - Yes

Desc Main

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Fill in this inforn	nation to identify you		F 800- 7 5			
Debtor 1	Zay M. Carrasqu	uillo Middle Name	Last Name		7	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT OF I	LLINOIS			
Case number (if known)					_	if this is an ded filing
Official Form	n 106D					
		Who Have Claims	Secure	d by Property		12/15
		If two married people are filing toge out, number the entries, and attach				
. Do any creditors	have claims secured by	y your property?				
☐ No. Check	this box and submit t	his form to the court with your oth	er schedules. Yo	ou have nothing else to	report on this form.	
Yes. Fill in	all of the information	below.				
Part 1: List Al	I Secured Claims					
for each claim. If m	ore than one creditor has	more than one secured claim, list the os a particular claim, list the other credit cal order according to the creditor's na	ors in Part 2. As	Amount of claim Do not deduct the	Column B  Value of collateral that supports this	Column C Unsecured portion
2.1 Ally Bank		Describe the property that secure	s the claim:	value of collateral. \$19,900.00	\$12,400.00	If any <b>\$7,500.00</b>
Creditor's Name		2015 Chevrolet Malibu LT				<u> </u>
PO box 38 Blooming	30902 ton, MN 55438	As of the date you file, the claim is apply.  Contingent	S: Check all that			
Number, Street,	, City, State & Zip Code	Unliquidated				
Who owes the de	ebt? Check one.	☐ Disputed  Nature of lien. Check all that apply	y.			
■ Debtor 1 only □ Debtor 2 only		An agreement you made (such a car loan)	as mortgage or sec	cured		
Debtor 1 and De	ebtor 2 only	☐ Statutory lien (such as tax lien, n	nechanic's lien)			
	ne debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this cle community de	aim relates to a	Other (including a right to offset)				
Date debt was incu	urred	Last 4 digits of account nu	mber <u>9561</u>			
		olumn A on this page. Write that nu		\$19,900	.00	
If this is the last Write that number		the dollar value totals from all page	es.	\$19,900	.00	

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	0430 17 02700 2	Document	Page 2	5 of 61	Descriviani				
Fill in t	his information to identify your o								
Debtor	1 Zay M. Carrasquil	lo							
200101	First Name	Middle Name	Last Name						
Debtor 2		Middle Name	Last Name						
(Spouse if	-								
United S	States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS						
Case no	umber								
(if known)					☐ Check if this is an				
					amended filing				
Officia	al Form 106E/F								
	dule E/F: Creditors W	ho Have Unsecured	Claims		12/15				
	mplete and accurate as possible. Us			Part 2 for creditors with NONPRIOR	ITY claims. List the other party to				
Schedule left. Attac	e G: Executory Contracts and Unexpi D: Creditors Who Have Claims Secu- ch the Continuation Page to this pag d case number (if known).	red by Property. If more space is n	eeded, copy 1	he Part you need, fill it out, number	the entries in the boxes on the				
Part 1:									
_	any creditors have priority unsecured	d claims against you?							
	No. Go to Part 2.								
□ \		V II							
Part 2:									
_	any creditors have nonpriority unsec								
Ц١	No. You have nothing to report in this pa	art. Submit this form to the court with y	our other sche	edules.					
<b>I</b>	es.								
unse	all of your nonpriority unsecured cla ecured claim, list the creditor separately one creditor holds a particular claim, li 2.	for each claim. For each claim listed,	identify what t	ype of claim it is. Do not list claims alre	eady included in Part 1. If more				
					Total claim				
4.1	Advocate Sherman Hospita	Last 4 digits of acco	unt number	6867	\$329.00				
	Nonpriority Creditor's Name	When was the debt	ingurrad?	2016					
	35134 Eagle Way Chicago, IL 60678	when was the dept	incurreu r	2010					
-	Number Street City State Zlp Code	As of the date you fi	le, the claim i	s: Check all that apply					
	Who incurred the debt? Check one.								
	Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed							
	At least one of the debtors and and		TY unsecured	d claim:					
	☐ Check if this claim is for a commodebt	P. L							
	Is the claim subject to offset?		☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	■ No			g plans, and other similar debts					
	Yes	·	/ledical Bil						
		— Other, Specify		-					

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Debtor 1 Zay M. Carrasquillo Case number (if know) 4.2 \$1,625.00 American Anesthesiology Last 4 digits of account number 1450 Nonpriority Creditor's Name PO BOX 120153 When was the debt incurred? 2016 Grand Rapids, MI 49528 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes 4.3 **American Anesthesiology** \$1,620.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 120153 When was the debt incurred? 2016 Grand Rapids, MI 49528 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Medical Bills** Other. Specify 4.4 **Big Picture Loans** Last 4 digits of account number 6121 \$1,720.00 Nonpriority Creditor's Name PO Box 704 When was the debt incurred? 2016 Watersmeet, MI 49969 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify loan

Page 27 of 61 Case number (if know) Debtor 1 Zay M. Carrasquillo 4.5 \$965.00 **Capital One** Last 4 digits of account number 0828 Nonpriority Creditor's Name PO Box 6494 When was the debt incurred? 2013 Carol Stream, IL 60197 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.6 **Capital One Bank** Last 4 digits of account number 2919 \$836.00 Nonpriority Creditor's Name PO Box 30281 When was the debt incurred? 2011-2016 Salt Lake City, UT 84130-0285 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.7 Capital One Bank Last 4 digits of account number 4060 \$967.00 Nonpriority Creditor's Name PO Box 98872 When was the debt incurred? 2014 Las Vegas, NV 89193 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Credit Card

Document Page 28 of 61 Case number (if know) Debtor 1 Zay M. Carrasquillo 4.8 **CEPAMERICA Illinois LLP** \$216.00 Last 4 digits of account number 2796 Nonpriority Creditor's Name PO Box 582663 When was the debt incurred? 2016 Modesto, CA 95358 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes 4.9 \$1,008.00 Chase Last 4 digits of account number 1841 Nonpriority Creditor's Name Box 15298 When was the debt incurred? 2012-2016 Wilmington, DE 19850 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify credit card 4.1 **Comenity Capital** 4466 \$690.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 182120 When was the debt incurred? 2014-2016 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No

☐ Yes

Is the claim subject to offset?

report as priority claims

■ Other. Specify Credit Card

☐ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

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Case number (if know)

Zay M. Carrasquillo	Case number (if know)					
Comenity Capital	Last 4 digits of account number 7712	\$1,222.00				
Nonpriority Creditor's Name PO Box 182120	When was the debt incurred?					
Columbus, OH 43218  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
□Yes	■ Other Specify Credit Card					
Elgin Laboratory Physicians	Last 4 digits of account number 0083	\$716.00				
Nonpriority Creditor's Name		<b>V. 10.00</b>				
PO Box 1509	When was the debt incurred? 2016					
Elgin, IL 60121  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
Who incurred the debt? Check one.	As of the date you me, the daminis. Oneck all that apply					
■ Debtor 1 only	☐ Contingent					
☐ Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
No	Debts to pension or profit-sharing plans, and other similar debts					
Yes	■ Other. Specify Medical Bills					
Elgin Laboratory Physicians	Last 4 digits of account number 0083	\$716.00				
Nonpriority Creditor's Name	<del></del>					
Box 1515	When was the debt incurred? 2016					
Addison, IL 60101  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
Who incurred the debt? Check one.						
Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
☐ Yes	■ Other. Specify Medical Bills					
	· · · · · · · · · · · · · · · · · · ·					

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Case number (if know) Debtor 1 Zay M. Carrasquillo 4.1 First Savings Bank 4011 \$254.00 Last 4 digits of account number 4 Nonpriority Creditor's Name 500 E. 60th St N When was the debt incurred? 2014 Sioux Falls, SD 57104 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.1 **HRRG** 2555 \$428.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO box 5406 Cincinnati, OH 45273 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify medical ☐ Yes 4.1 IC System \$1.011.00 Last 4 digits of account number 6 Nonpriority Creditor's Name 444 Highway 96 East When was the debt incurred? 2013 PO Box 64378 Saint Paul, MN 55164 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Bills ☐ Yes

Document Page 31 of 61 Debtor 1 Zay M. Carrasquillo Case number (if know) 4.1 Inpatient Consulants of IL. 5898 \$428.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 844918 When was the debt incurred? 2016 Los Angeles, CA 90084 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Bills ☐ Yes 4.1 **Kane County Credit Union** 4530 \$500.00 Last 4 digits of account number 8 Nonpriority Creditor's Name PO Box 1360 When was the debt incurred? 2010-2016 **Elgin, IL 60121** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.1 Kane County Credit Union 4530 \$10.683.00 9 Last 4 digits of account number Nonpriority Creditor's Name PO Box 1360 When was the debt incurred? 2015 Elgin, IL 60121 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

Other. Specify loan

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Case number (if know) Debtor 1 Zay M. Carrasquillo 4.2 **Merrick Bank** 5382 \$722.00 Last 4 digits of account number 3 Nonpriority Creditor's Name c/o True Accord When was the debt incurred? 2014 153 Maiden Lane San Francisco, CA 94108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.2 **Presence Health** 5085 \$920.00 Last 4 digits of account number Nonpriority Creditor's Name **62314 Collection Center** 2016 When was the debt incurred? Chicago, IL 60693 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes 4.2 Presense St. Joseph Hospital 3907 \$50,000.00 Last 4 digits of account number 5 Nonpriority Creditor's Name 32816 Collection Center Dr. When was the debt incurred? 2016 Chicago, IL 60606 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Bills ☐ Yes

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Debtor 1 Zay M. Carrasquillo

Walmart/Northland Group	Last 4 digits of account number	6343	\$377.00
Nonpriority Creditor's Name		-	
Box 390846	When was the debt incurred?	2011	
Minneapolis, MN 55439  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	■ Other. Specify Credit Card	I	

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total					
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	78,411.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	78,411.00

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

		170.11111.	111 1 (1111. )	
Fill in this inform	nation to identify your	case:		
Debtor 1	Zay M. Carrasqui	llo		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

P	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Ally	Malibu lease
2.2	Fox Run Apartments	apartment lease

		Docume	ent Page 36 o	of 61	
Fill in thi	s information to identify you	r case:			
Debtor 1	Zay M. Carrasqu	illo			
Debior 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, f	iling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
•					
Case nur (if known)	nber				☐ Check if this is an
,					amended filing
					· ·
Officia	al Form 106H				
	dule H: Your Cod	lobtore			40/45
Scrie	dule H. Toul Cot	ientoi 2			12/15
our nam	and number the entries in the earth of the earth case number (if known by you have any codebtors? (if	n). Answer every question		, -	p of any Additional Pages, write
■ No					
Arizo  No  Ye  3. In Co in lin Form	ne 2 again as a codebtor only n 106D), Schedule E/F (Officia	a, Nevada, New Mexico, Pu ouse, or legal equivalent live otors. Do not include your if that person is a guaran	erto Rico, Texas, Wash e with you at the time? spouse as a codebto tor or cosigner. Make	ington, and Wisconsin.) r if your spouse is filin sure you have listed t	
out (	Column 2.				
	Column 1: Your codebtor	710.0-1-			editor to whom you owe the debt
	Name, Number, Street, City, State and	ZIP Code		Check all schedule	es that apply:
3.1				☐ Schedule D, lin	ie.
0.1	Name			□ Schedule E/F,	
				☐ Schedule G, lir	
	Number Street City	State	ZIP Code		
	City	State	ZIP Code		
3.2				☐ Schedule D, lin	
5.2	Name			☐ Schedule E/F,	
				☐ Schedule E/F,	
				— Scriedule G, III	IG
	Number Street		715.0		
	City	State	ZIP Code		

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Fill	in this information to identify your ca	ase:						
	btor 1 Zay M. Carra							
	btor 2  buse, if filing)				_			
Uni	ited States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS		_			
(If kr	se number  fficial Form 106l		-			13 income	ed filing ent showing post as of the following	
_	chedule I: Your Inc	ome				MM / DD/ Y	YYY	12/15
sup spo atta	as complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form. The complete the ployment of the complete the c	are married and not filing w	ng jointly, and your s ith you, do not includ	pouse is e inforn	s living v nation al	vith you, included the point your spoots	ude information ouse. If more sp	about your ace is needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	? or non-filing sp	oouse
	If you have more than one job,	Employment status	■ Employed	nployed		☐ Emplo	•	
	attach a separate page with information about additional employers.		☐ Not employed			☐ Not e	mployed	
		Occupation	Nurse					
	Include part-time, seasonal, or self-employed work.	Employer's name	Lexington Streamwood					
	Occupation may include student or homemaker, if it applies.	Employer's address	815 E. Irving Par	k Rd.				
		How long employed t	here? 4 month	s				
Pai	Give Details About Mor	nthly Income						
	mate monthly income as of the dause unless you are separated.	ate you file this form. If	you have nothing to re	port for a	any line,	write \$0 in the	space. Include y	our non-filing
	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all e	mployers	for that perso	on on the lines be	low. If you need
					For	Debtor 1	For Debtor 2 non-filing spo	
2.	List monthly gross wages, sala deductions). If not paid monthly, or	ry, and commissions (b calculate what the monthl	efore all payroll y wage would be.	2.	\$	4,837.00	\$	N/A
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A

Calculate gross Income. Add line 2 + line 3.

4,837.00

N/A

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Deb	tor 1	Zay M. Carrasquillo	-	C	ase r	number ( <i>if kn</i>	own)				
					For	Debtor 1		Foi	r Debtor	2 or	
									n-filing s	<u> </u>	
	Cop	y line 4 here	4.		\$	4,837	.00	\$_		N/A	_
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a		\$	1,311	.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$	0	.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c		\$		.00	\$_		N/A	_
	5d.	Required repayments of retirement fund loans	5d		\$		.00	\$_		N/A	_
	5e.	Insurance	5e		\$	203		\$_		N/A	_
	5f. 5g.	Domestic support obligations Union dues	5f. 5g		\$		.00	\$_ \$		N/A N/A	_
	5g. 5h.	Other deductions. Specify: uniforms	5h		\$ —			+ \$_		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	;	\$	1,564	.00	\$		N/A	<del>-</del>
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	:	\$	3,273	.00	\$		N/A	_
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a		\$	0	.00	\$		N/A	_
	8b.	Interest and dividends	8b		\$—		.00	-\$ -		N/A N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce			_			· <del>-</del>			_
	8d.	settlement, and property settlement.  Unemployment compensation	8c 8d		\$ _		.00	\$_ \$		N/A N/A	_
	8e.	Social Security	8e		<b>\$</b> —		.00	\$ -		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.		\$		.00	\$_		N/A	_
	8g.	Pension or retirement income	8g		\$		.00	–		N/A	_
	8h.	Other monthly income. Specify:	8h	.+	\$	U	.00	+ \$_		N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		0	.00	\$_		N/A	A
10.	Calc	culate monthly income. Add line 7 + line 9.	10.	\$	3	3,273.00	+ \$		N/A	= \$	3,273.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				,					,
11.	Incluothe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your r friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify:	depe			•			Schedule	∍ J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines							12.	\$Combi	
13.	Dos	ou expect an increase or decrease within the year after you file this form	?							month	ly income
10.	<b>=</b>	No.	•								
	_	Ves Evolain:									

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Fill	in this information to identify your case:				
Deb	otor 1 Zay M. Carrasquillo		Che	ck if this is:	
	otor 2			An amended filing A supplement show 13 expenses as of	ving postpetition chapter the following date:
Unit	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS	S		MM / DD / YYYY	
				, 55, 1111	
	se numbel known)				
	fficial Form 106J				
	chedule J: Your Expenses				12/15
info	as complete and accurate as possible. If two married people are f ormation. If more space is needed, attach another sheet to this for mber (if known). Answer every question.				
Par	rt 1: Describe Your Household Is this a joint case?				
1.	■ No. Go to line 2.				
	☐ Yes. Does Debtor 2 live in a separate household? ☐ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses fo</i>	r Separate House	hold of Deb	otor 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Yes. Fill out this information for	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.				□ Yes □ No
					☐ Yes
	_			_	□ No
	-				☐ Yes
					□ No □ Yes
3.	Do your expenses include ■ No				<b>-</b> 103
	expenses of people other than yourself and your dependents?				
Est exp	t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless you penses as of a date after the bankruptcy is filed. If this is a suppler plicable date.				
the	elude expenses paid for with non-cash government assistance if you avalue of such assistance and have included it on Schedule I: You fificial Form 106I.)			Your exp	enses
4.	The rental or home ownership expenses for your residence. Incl payments and any rent for the ground or lot.	ude first mortgage	4. :	\$	915.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$	\$	0.00
	4b. Property, homeowner's, or renter's insurance		4b.	·	0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$	·	100.00
5.	<ul> <li>4d. Homeowner's association or condominium dues</li> <li>Additional mortgage payments for your residence, such as home</li> </ul>	equity loans	4d. \$ 5. \$	·	0.00 0.00
٥.		oquity Iouilo	J. 1	•	0.00

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Debtor	<sup>1</sup> Zay M.	Carrasquillo	Case num	ber (if known)	
6. <b>Ut</b>	tilities:				
6a		y, heat, natural gas	6a.	\$	250.00
6b	,	ewer, garbage collection	6b.		0.00
60		ne, cell phone, Internet, satellite, and cable services	6c.		375.00
6d	•		6d.	·	0.00
		sekeeping supplies	7.		500.00
		children's education costs	8.	\$	0.00
_			9.	\$	
	-	dry, and dry cleaning products and services	9. 10.	· · · —	100.00
		•			100.00
		ental expenses	11.	\$	50.00
		Include gas, maintenance, bus or train fare. car payments.	12.	\$	250.00
		, clubs, recreation, newspapers, magazines, and books	13.	·	0.00
		tributions and religious donations	14.	· · · —	50.00
	isurance.	inibutions and religious donations	14.	Ψ	50.00
		insurance deducted from your pay or included in lines 4 or 20.			
	5a. Life insur		15a.	\$	0.00
	5b. Health in:		15b.		0.00
	5c. Vehicle in		15b.		150.00
		surance. Specify:	15d.		
		include taxes deducted from your pay or included in lines 4 or 20.	13u.	Ψ	0.00
_	pecify:	nicidae taxes deducted from your pay of included in lines 4 of 20.	16.	\$	0.00
		lease payments:			0.00
		nents for Vehicle 1	17a.	\$	409.00
		nents for Vehicle 2	17b.	· · -	0.00
	7c. Other. Sp		17c.		0.00
	7d. Other Sp		17d.	·	0.00
		s of alimony, maintenance, and support that you did not report as		Ψ	0.00
		your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).		\$	0.00
		ts you make to support others who do not live with you.		\$	0.00
Sp	pecify:		19.		
. Ot	ther real proj	perty expenses not included in lines 4 or 5 of this form or on Scho	edule I: Yo	our Income.	
20	)a. Mortgage	es on other property	20a.	\$	0.00
20	Db. Real esta	ate taxes	20b.	\$	0.00
20	c. Property,	homeowner's, or renter's insurance	20c.	\$	0.00
		ance, repair, and upkeep expenses	20d.	\$	0.00
		ner's association or condominium dues	20e.		0.00
	ther: Specify:		21.	· -	0.00
	iner: Opcony.			ΙΨ	0.00
	•	monthly expenses			
	2a. Add lines 4	S		\$	3,249.00
22	2b. Copy line 2	22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	·
22	2c. Add line 22	2a and 22b. The result is your monthly expenses.		\$	3,249.00
	•	monthly net income.		•	
		e 12 (your combined monthly income) from Schedule I.	23a.		3,273.00
23	3b. Copy you	ur monthly expenses from line 22c above.	23b.	-\$	3,249.00
	. 0.1.				
23		your monthly expenses from your monthly income.	23c.	\$	24.00
	rne resu	It is your <i>monthly net income</i> .	200.	*	
4. Da	o vou expect	an increase or decrease in your expenses within the year after yo	ou file this	form?	
Fo	or example, do y	you expect to finish paying for your car loan within the year or do you expect you			or decrease because of
		e terms of your mortgage?			
	No.				
	Yes.	Explain here:			
	4 100.	1			

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Fill in this inform	nation to identify your	case:			
Debtor 1	Zay M. Carrasqui	llo			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
0					
Case number				-	7 Check if this is an
,				-	amended filing
-					· ·
Official Form	n 106Dec				
	-	n Individual	Dobtor's School	uloc	
Declarat	ion About a	in individual	Debtor's Sched	uies	12/15
If two married pe	ople are filing together	r, both are equally respoi	nsible for supplying correct info	rmation.	
You must file this	s form whenever you fi	le bankruptcy schedules	or amended schedules. Making	a false statement, c	oncealing property, or
obtaining money	or property by fraud in	n connection with a bank	ruptcy case can result in fines i		
years, or both. 18	3 U.S.C. §§ 152, 1341, 1	519, and 3571.			
0:	Delen				
Sign	Below				
Did you pay	or agree to pay some	one who is NOT an attor	ney to help you fill out bankrupt	cy forms?	
■ No					
■ No					
☐ Yes. N	lame of person				Petition Preparer's Notice,
				Declaration, and Sig	gnature (Official Form 119)
Under penal	ty of periury. I declare	that I have read the sum	mary and schedules filed with tl	nis declaration and	
	true and correct.		•		
V 1-17	M. O		v		
	M. Carrasquillo		Signature of Dobtor C	)	
	Carrasquillo e of Debtor 1		Signature of Debtor 2		
Signatur	C OI DEDIOI I				

Date

Date **January 31, 2017** 

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E:II :	this inform	-4: 4- :- 4:6				
		ation to identify you				
Debto	or 1	Zay M. Carrasqu First Name	Middle Name	Last Name		
Debto	or 2 e if, filing)	First Name	Middle Name	Last Name		
` .	•					
Unite	d States Ban	kruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS		
Case (if know	number				_	Check if this is an amended filing
Stat		of Financial	Affairs for Individ			4/10
inform numbe	nation. If mo er (if known)	re space is needed, . Answer every ques	rital Status and Where You	this form. On the top of any		
[ [	_					
2. D	ouring the las	st 3 years, have you	lived anywhere other than v	where you live now?		
г	] No					
I		all of the places you li	ived in the last 3 years. Do no	ot include where you live now	<i>I</i> .	
ı	Debtor 1 Pric	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	1213 Sandl South Elgir		From-To: <b>2006-2016</b>	☐ Same as Debtor	ı	☐ Same as Debtor 1 From-To:
	and territorie  No Yes. Mak	s include Arizona, Ca	ver live with a spouse or leg lifornia, Idaho, Louisiana, Nev nedule H: Your Codebtors (Of r Income	vada, New Mexico, Puerto R		
F	ill in the total	amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-	time activities.	ndar years?
	□ No					
	Yes. Fill i	n the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	<b>Gross income</b> (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		f current year until for bankruptcy:	■ Wages, commissions, bonuses, tips	\$2,300.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Case number (if known) Debtor 1 Zay M. Carrasquillo

			Debtor 1			Debtor 2		
			Sources of income Check all that apply.	Gross income (before deductions exclusions)	and	Sources of inco Check all that ap		Gross income (before deductions and exclusions)
	r last calendar year: anuary 1 to Decembe		■ Wages, commissions, bonuses, tips	\$28,15	0.00	☐ Wages, common bonuses, tips	nissions,	
			☐ Operating a business			☐ Operating a b	usiness	
	r the calendar year l anuary 1 to Decembe		■ Wages, commissions, bonuses, tips	\$39,18	4.00	☐ Wages, common bonuses, tips	nissions,	
			☐ Operating a business			☐ Operating a b	usiness	
	winnings. If you are	filing a joint cas	pensions; rental income; intere e and you have income that y me from each source separate	ou received together,	list it on	ly once under Deb	otor 1.	and locally
			Debtor 1			Dobtor 2		
			Sources of income Describe below.	Gross income fro each source (before deductions exclusions)		Debtor 2 Sources of inco Describe below.	me	Gross income (before deductions and exclusions)
Pa	rt 3: List Certain	Payments You	Made Before You Filed for E	Bankruptcy				
3.	□ No. <b>Neither</b> individual During to □ No. □ Yes	Debtor 1 nor Dal primarily for a ne 90 days before Go to line 7 List below 6 paid that crunot include	each creditor to whom you paid editor. Do not include payment payments to an attorney for th	mer debts. Consumed purpose."  If you pay any creditor  If a total of \$6,425* or its for domestic supposis bankruptcy case.	r a total o more in ort obliga	of \$6,425* or more one or more payr tions, such as chil	e? nents and tl d support a	he total amount you nd alimony. Also, do
	Yes. Debtor	1 or Debtor 2 o	on 4/01/19 and every 3 years r both have primarily consulate re you filed for bankruptcy, did	mer debts.			adjustment	
	■ No.	Go to line 7						
	□ Yes	include pay	each creditor to whom you paid ments for domestic support ob this bankruptcy case.					
	Creditor's Name a	and Address	Dates of paymen		unt aid	Amount you still owe	Was this p	payment for

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Case number (if known) Document Debtor 1 Zay M. Carrasquillo

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.							
	Yes. List all payments to an insider.							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment		
8.	Within 1 year before you filed for bankrupte insider? Include payments on debts guaranteed or cos		ments or transfer a	any property on a	account of a d	lebt that benefited an		
	<ul><li>■ No</li><li>□ Yes. List all payments to an insider</li></ul>							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe		r this payment ditor's name		
Pai	rt 4: Identify Legal Actions, Repossession	ns. and Foreclosures						
9.	Within 1 year before you filed for bankruptuctist all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.							
	Case title Case number	Nature of the case	Court or agency		Status of the	he case		
10.	Within 1 year before you filed for bankrupte Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.  Creditor Name and Address		rty repossessed, f	oreclosed, garni		d, seized, or levied?  Value of the property		
		Explain what happened	I			property		
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec  ■ No □ Yes. Fill in the details.	ause you owed a debt?		nancial institutio	n, set off any	amounts from your		
	Creditor Name and Address	Describe the action the	creditor took		action was	Amount		
12.	<ul> <li>Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?</li> <li>No</li> <li>☐ Yes</li> </ul>							
Pai	rt 5: List Certain Gifts and Contributions							
13.	Within 2 years before you filed for bankrup  ■ No □ Yes. Fill in the details for each gift.	tcy, did you give any gifts	s with a total value	of more than \$6	00 per person	?		
	Gifts with a total value of more than \$600 per person	Describe the gifts		Date the g	es you gave gifts	Value		
	Person to Whom You Gave the Gift and Address:							

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Deb	otor 1 Zay M. Carrasquillo		Case number	(if known)					
14.	<ul> <li>Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?</li> <li>No</li> <li>Yes. Fill in the details for each gift or contribution.</li> </ul>								
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co	total	Describe what you contributed	Dates you contributed	Value				
Par	rt 6: List Certain Losses								
15.	Within 1 year before you filed for banks or gambling?	uptcy or	since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaste				
	■ No □ Yes. Fill in the details.								
	Describe the property you lost and how the loss occurred	Include	ibe any insurance coverage for the loss ethe amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property los				
Par	rt 7: List Certain Payments or Transfe	rs							
	□ No ■ Yes. Fill in the details.  Person Who Was Paid Address Email or website address		Description and value of any property transferred	Date payment or transfer was made	Amount o paymen				
	Person Who Made the Payment, if Not Law Offices of Bradley S. Covey, 428 S. Batavia Ave. Batavia, IL 60510 bradley.covey@gmail.com		Attorney Fees	1/17	\$1,500.00				
17.	Within 1 year before you filed for banks promised to help you deal with your cr Do not include any payment or transfer th	editors o		or transfer any prope	rty to anyone who				
	■ No □ Yes. Fill in the details.								
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount o paymen				
18.	transferred in the ordinary course of yo	our busin ers made	as security (such as the granting of a security intere						

Address

Description and value of

property transferred

**Person Who Received Transfer** 

Person's relationship to you

Date transfer was

made

Describe any property or

paid in exchange

payments received or debts

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Debtor 1 Zay M. Carrasquillo

19.	Within 10 years before you filed for bankrupte beneficiary? (These are often called asset-protein No.		ny property to a s	elf-settle	d trust or similar device	of whi	ich you are a	
	☐ Yes. Fill in the details.							
	Name of trust	Description and	value of the prop	erty trans	sferred	Date	e Transfer was le	
Pa	t 8: List of Certain Financial Accounts, Inst	ruments, Safe Depos	it Boxes, and Sto	rage Unit	s			
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ	other financial accou	ınts; certificates o	of deposi			,	
	■ No							
	☐ Yes. Fill in the details.							
		Last 4 digits of account number	Type of accour instrument	nt or	Date account was closed, sold, moved, or transferred	be	Last balance fore closing or transfer	
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?							
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution	Who also had so	to it?	Dagariba	the contents	ь.	a van atill	
	Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe	the contents		o you still ave it?	
22.	Have you stored property in a storage unit or	place other than you	r home within 1 y	ear befor	e you filed for bankrupt	су?		
	No							
	Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents		o you still ave it?	
Pa	t 9: Identify Property You Hold or Control fo	or Someone Else						
23.	Do you hold or control any property that som for someone.	eone else owns? Inc	ude any property	you borı	rowed from, are storing	for, or	hold in trust	
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	the property		Value	
Pa	t 10: Give Details About Environmental Infor	mation						
For	the purpose of Part 10, the following definition	ns apply:						
	Environmental law means any federal, state, toxic substances, wastes, or material into the regulations controlling the cleanup of these s	e air, land, soil, surfac	e water, groundw					
	Site means any location, facility, or property to own, operate, or utilize it, including dispos	as defined under any		w, wheth	er you now own, operat	e, or u	tilize it or used	

Official Form 107

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Zay M. Carrasquillo

24.	Has	any governmental unit notified you that	you may be liable or potentially liable	e une	der or in violation of an environm	ental law?		
		Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	ıd	Environmental law, if you know it	Date of notice		
25.	Hav	e you notified any governmental unit of	any release of hazardous material?					
		No Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	ıd	Environmental law, if you know it	Date of notice		
26.	Hav	e you been a party in any judicial or adn	ninistrative proceeding under any env	iron	mental law? Include settlements	and orders.		
		No Yes. Fill in the details.						
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ature of the case	Status of the case		
Par	t 11:	Give Details About Your Business or	Connections to Any Business					
27.	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?							
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership							
		☐ An officer, director, or managing ex	ecutive of a corporation					
		☐ An owner of at least 5% of the voting	g or equity securities of a corporation					
		No. None of the above applies. Go to F	art 12.					
		Yes. Check all that apply above and fill	in the details below for each business	s.				
		siness Name dress	Describe the nature of the business		Employer Identification numbe Do not include Social Security			
		mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Dates business existed	number of fritt.		
28.		nin 2 years before you filed for bankrupt itutions, creditors, or other parties.	cy, did you give a financial statement	to a	nyone about your business? Incl	ude all financial		
		No Yes. Fill in the details below.						
		me dress mber, Street, City, State and ZIP Code)	Date Issued					

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Debtor 1 Zay M. Carrasquillo

Part 12: Sign Below		
are true and correct. I understand that I	t of Financial Affairs and any attachments, and I declare under penalty of perjury that the answ king a false statement, concealing property, or obtaining money or property by fraud in connecup to \$250,000, or imprisonment for up to 20 years, or both.	
/s/ Zay M. Carrasquillo		
Zay M. Carrasquillo Signature of Debtor 1	Signature of Debtor 2	
Date January 31, 2017	Date	
Did you attach additional pages to You	tatement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?	
■ No		
☐ Yes		
Did you pay or agree to pay someone w	o is not an attorney to help you fill out bankruptcy forms?	
■ No		

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

connection

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Fill in this infor	mation to identify your	case:		
Debtor 1	Zay M. Carrasqui			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
	ankruptcy Court for the:		RICT OF ILLINOIS	
Officed States Ba	ankruptcy Court for the.	NORTHERN DIST	RICT OF ILLINOIS	
Case number (if known)				☐ Check if this is an
(ii kilowii)				amended filing
Official Fo		n for India	iduala Filipa Undar Ch	antar 7
Stateme	nt of intentio	n tor indiv	iduals Filing Under Ch	12/15
If you are an ind	lividual filing under cha	pter 7. vou must fill	out this form if:	
	e claims secured by yo	-		
	sed personal property a			
	ever is earlier, unless th		you file your bankruptcy petition or by the time for cause. You must also send cop	
	eople are filing togethe	r in a joint case, bo	h are equally responsible for supplying c	correct information. Both debtors must
	and accurate as possib our name and case nur		needed, attach a separate sheet to this fo	orm. On the top of any additional pages,
Part 1: List Y	our Creditors Who Hav	o Socured Claims		
1. For any credit information be	•	art 1 of Schedule D	Creditors Who Have Claims Secured by	Property (Official Form 106D), fill in the
Identify the cr	editor and the property t	hat is collateral	What do you intend to do with the prop secures a debt?	erty that Did you claim the property as exempt on Schedule C?
Craditaria A	Aller Damle			_
Creditor's A	Ally Bank		<ul><li>☐ Surrender the property.</li><li>☐ Retain the property and redeem it.</li></ul>	■ No
December the second			Retain the property and enter into a	☐ Yes
· ·	2015 Chevrolet Ma	llibu L I	Reaffirmation Agreement.	
property securing debt	:		☐ Retain the property and [explain]:	
	our Unexpired Persona ed personal property le		n Schedule G: Executory Contracts and I	Unexpired Leases (Official Form 106G), fill
in the information	on below. Do not list rea	al estate leases. Un		effect; the lease period has not yet ended.
Describe your u	unexpired personal pro	perty leases		Will the lease be assumed?
Lessor's name:				П №
Description of le	ased			□ No
Property:				☐ Yes
Lessor's name:				□ No
Description of le	ased			
Property:				☐ Yes
Lessor's name:				□ No

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Debt	or 1 Zay M. Carrasquillo	Case number (if known)
Desc Prop	ription of leased ertv:	☐ Yes
Less	or's name:	□ No
Description of leased Property:		☐ Yes
Lessor's name: Description of leased Property:		□ No
		☐ Yes
Lessor's name: Description of leased		□ No
Prop	•	☐ Yes
Lessor's name: Description of leased		□ No
Prop		☐ Yes
Part	3: Sign Below	
	r penalty of perjury, I declare that I have indicated my intention a rty that is subject to an unexpired lease.	about any property of my estate that secures a debt and any personal
_	/s/ Zay M. Carrasquillo	X
	Zay M. Carrasquillo Signature of Debtor 1	Signature of Debtor 2
	Date January 31, 2017	Date

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-02733 Doc 1 Filed 01/31/17 Entered 01/31/17 13:31:19 Desc Main Document Page 55 of 61

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**Northern District of Illinois

In re	Zay M. Carrasquillo		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR DE	EBTOR(S)
c	ursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(b ompensation paid to me within one year before the filing e rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy	y, or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,500.00
	Prior to the filing of this statement I have received			1,500.00
	Balance Due		\$	0.00
2. T	he source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3. T	he source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4. <b>I</b>	I have not agreed to share the above-disclosed comper	nsation with any other person	n unless they are mem	bers and associates of my law firm.
[	I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name			
5. I	n return for the above-disclosed fee, I have agreed to reno	der legal service for all aspec	cts of the bankruptcy of	ase, including:
b c	Analysis of the debtor's financial situation, and renderi Preparation and filing of any petition, schedules, staten Representation of the debtor at the meeting of creditors Representation of the debtor in adversary proceedings [Other provisions as needed]	nent of affairs and plan whice and confirmation hearing, a	th may be required; and any adjourned hea	
6. B	y agreement with the debtor(s), the above-disclosed fee of <b>Negotiation or filing of any reaffirmation a</b>		ng service:	
		CERTIFICATION		
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement fo	or payment to me for re	epresentation of the debtor(s) in
Ja	nuary 31, 2017	/s/ Bradley S. Co	ovey	
Do		Bradley S. Cove		
		Signature of Attorn <b>Law Offices of E</b>	aey Bradley S. Covey, P	.C.
		428 S. Batavia A		
		Batavia, IL 6051 630-879-9559 F	0 ax: 630-882-0608	
		bradley.covey@		
		Name of law firm		

### Advance Payment Retainer Agreement

I/we. Zay Carrasquillo	, the undersigned, hereinafter referred to as "Client",
agree to employ the Law Offices of Bradley S. Covey, P.	, the undersigned, hereinafter referred to as "Client", C, hereinafter referred to as "Attorney", to render legal serv-
ices in connection with filing a Chapter 7 bankruptcy for	me, and hereby empower and authorize Attorney to do all
things, in their sole discretion, reasonably necessary to b	ring the matter to a successful conclusion. Client acknowl-
edges that the following advance payment retainer agre	ement has been fully explained, and Client agrees to pay said
fees and costs in consideration of legal services rendered	d or to be rendered.

Client agrees to pay Attorney a fee of \$\_\_/2\_Ø\_\_\_ for services set forth below. In addition, Client agrees to pay all costs, including the filing fee for the bankruptcy (\$335.00) for a total of \$\_\_/ ころう。.

This retainer agreement is an advance payment retainer agreement. The funds Client has agreed to pay Attorney shall be deposited in the Law Offices of Bradley S. Covey, P.C. General Operating Account and ownership of said funds shall pass to the Law Offices of Bradley S. Covey, P.C. immediately upon payment.

As our client, it is your option to have your money placed into a security retainer. The choice of the type of retainer to be used is yours alone.

The special purpose for this advance payment retainer is to allow Client to retain Attorney to represent him against creditors. Client understands that it is advantageous to treat this retainer as an advance payment retainer in that it protects the funds paid to Attorney from the claims of his creditors. If this retainer were treated as a security retainer said funds would remain the property of Client and therefore subject to the claims of the Client's creditors.

It is understood that the above referenced flat fee is payment for services rendered and services to be performed. The services include: review of financial status; review of various documents related to debts and obligations; counseling as to various types of bankruptcy chapters; effect of bankruptcy on future ability to obtain new credit; effect of reaffirmation (but not the preparation of or filing reaffirmation agreements), redemption, avoiding liens and surrendering property; specific advice regarding how to avoid bankruptcy and alternatives to bankruptcy; complete drafting of all required bankruptcy documents; revision and redraft of final bankruptcy documents; attending creditors' meeting, and closing file.

This Advanced Payment Agreement does not include reaffirmation agreements. Attorney is not responsible for obtaining, preparing or filing any reaffirmation agreement.

Client agrees that additional attorney's fees will be due should additional representation become necessary, including, but not limited to any 2004 examination, any adversary proceedings, objections to discharge, or any other action, hearing or representation that is not specified in the preceding paragraph of this agreement. Said additional representation shall be covered by a separate legal services agreement and will require an additional retainer.

The Client agrees that should he decide not to file bankruptcy or decide not to continue using Attorney's services, Attorney may retain any fees paid and client shall not be entitled to a refund.

Client agrees to cooperate in the preparation of the bankruptcy case, to appear for the creditors' meeting, depositions and court appearances and to comply with all reasonable requests made in preparation of this bankruptcy case. Failure to cooperate may result in Court-imposed sanctions and Attorney's withdrawal from the case.

Client understands that he shall receive copies of all documents related to his file. Client should retain those documents as his copy of his file. Should Client require additional copies of the Attorney's file the Client understands that he will be charged for those copies.

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Client understands that his file shall be kept no more than five years. Should Client require copies of any documents or the return of original documents provided to Attorney he must request those copies in writing before the expiration of that five-year period.

It is agreed that upon the event of any default or breach of any kind under this agreement by Client, Attorney reserves the right to withdraw as counsel of record for Client. It is further agreed that Client shall not have any recourse or claim against Attorney for damages following the withdrawal of Attorney as Client's counsel.

In some cases it may be necessary to hire an attorney outside Attorney's firm. This attorney will be paid out of the retainer paid to Attorney. Client expressly consents to the hiring of an outside attorney to cover court dates as needed.

Client understands that it is the Client's responsibility to provide Attorney with a complete and accurate list of creditors and other information requested on Attorney's Debt Listing Sheet and Questionnaire. The Client further understands that any debts not listed in his bankruptcy schedules may not be discharged. If Client fails to provide Attorney with all information necessary to prepare the necessary documents and said failure necessates the amending of the schedules or Statement of Financial Affairs, Client agrees to pay an additional \$100.00 to cover the fees and costs of said amendment.

The fees charged in connection with this bankruptcy and for bankruptcy issues only. They do not included resolution of any matters involving credit information.

This constitutes the entire agreement between the Attorney and Clients regarding attorneys' fees and/or services provided in the engagement, the parties agree to resolve that dispute through mediation, followed by arbitration before any suit is filed.

Attorney is a debt relief agency and helps people file for relief under the Bankruptcy Code.

#### Special Financial Management Course Notice

Client MUST provide Attorney with a copy of Client's Certificate of Completion of Financial Management Course. If Client fails to ensure that Attorney has received and filed the required Certificate of Completion of Financial Management Course, the Client shall be responsible for payment of the case reopening fee and additional Attorney's fees of \$600.00 for filing a motion to reopen the case and file said certificate. Attorney is under no obligation to file any motion to reopen Client's case until the above referenced fees and costs are paid.

By Client's signature below, Client acknowledges understanding the terms of this agreement and agrees to abide by its provisions. Client has received a copy of this agreement for his records no later than five business days after the first date on which the Attorney provided any bankruptcy assistance services to client.

ent

### **United States Bankruptcy Court** Northern District of Illinois

In re	Zay M. Carrasquillo		Case No.				
		Debtor(s)	Chapter	7			
	VEI	VERIFICATION OF CREDITOR MATRIX					
		Number of Cro	editors: _	29			
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of creditors	s is true and	correct to the best of my			
Date:	January 31, 2017	/s/ Zay M. Carrasquillo Zay M. Carrasquillo Signature of Debtor					

Advocate Sherman Hospital 35134 Eagle Way Chicago, IL 60678

Ally

Ally Bank PO box 380902 Bloomington, MN 55438

American Anesthesiology PO BOX 120153 Grand Rapids, MI 49528

American Anesthesiology PO BOX 120153 Grand Rapids, MI 49528

Big Picture Loans PO Box 704 Watersmeet, MI 49969

Capital One PO Box 6494 Carol Stream, IL 60197

Capital One Bank PO Box 30281 Salt Lake City, UT 84130-0285

Capital One Bank PO Box 98872 Las Vegas, NV 89193

CEPAMERICA Illinois LLP PO Box 582663 Modesto, CA 95358

Chase Box 15298 Wilmington, DE 19850 Comenity Capital PO Box 182120 Columbus, OH 43218

Comenity Capital PO Box 182120 Columbus, OH 43218

Elgin Laboratory Physicians PO Box 1509 Elgin, IL 60121

Elgin Laboratory Physicians Box 1515 Addison, IL 60101

First Savings Bank 500 E. 60th St N Sioux Falls, SD 57104

Fox Run Apartments

HRRG PO box 5406 Cincinnati, OH 45273

IC System
444 Highway 96 East
PO Box 64378
Saint Paul, MN 55164

Inpatient Consulants of IL. PO Box 844918 Los Angeles, CA 90084

Kane County Credit Union PO Box 1360 Elgin, IL 60121

Kane County Credit Union PO Box 1360 Elgin, IL 60121

Lab Corporation PO Box 2240 Burlington, NC 27216

Macy's PO Box 8218 Mason, OH 45040

Mercy Health System PO Box 50033 Janesville, WI 53547

Merrick Bank c/o True Accord 153 Maiden Lane San Francisco, CA 94108

Presence Health 62314 Collection Center Chicago, IL 60693

Presense St. Joseph Hospital 32816 Collection Center Dr. Chicago, IL 60606

Walmart/Northland Group Box 390846 Minneapolis, MN 55439